



**CITY OF SOMERVILLE, MASSACHUSETTS**

**Treasury Department**

**JOSEPH A. CURTATONE**

**MAYOR**

**WILLIAM FOWLER**  
**TREASURER & COLLECTOR**

**REQUEST & AUTHORIZATION TO TRANSFER A CREDIT BALANCE**

Applicant/Property Owner(s): \_\_\_\_\_

Property Address: \_\_\_\_\_ Somerville, MA 0214 \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

Telephone number: \_\_\_\_\_

**TRANSFER FROM:**      Real Estate      Water      Personal Property

Account Number: \_\_\_\_\_ Fiscal Year \_\_\_\_\_

Amount: \$ \_\_\_\_\_

**TRANSFER TO:**      Tax title      Real Estate      Water      Personal Property

Account Number: \_\_\_\_\_ Fiscal Year \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Amount (if any) expected to be Refunded: \$ \_\_\_\_\_

By signing below you are hereby requesting that the credit balance above be processed and are further authorizing the City of Somerville to transfer and apply said credit balance toward your outstanding account balance. If after complete satisfaction of the outstanding account balance a credit remains, you hereby authorize the City of Somerville to post a refund check to you at the address above.

The Applicant/Property Owner further acknowledges that he or she is duly authorized to make the foregoing request with the City of Somerville.

CITY OF SOMERVILLE

Applicant/Property Owner(s):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(date)

\_\_\_\_\_

(date)